POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mn. 10		17-10-61
O.I.P.E. CLASSIFIER	11011		7 7 7 9 9 1
FORMALITY REVIEW	<u>U.</u>	63.7	01210
RESPONSE FORMALITY REVIEW	300	1001	16 63.0

INDEX OF CLAIMS

~	Rejected	'N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α.	Appeal
÷	Restricted	0	Objected

Claim Cubu 6	Date	Claim	Date		***
Final			Date	Claim	Date
1 (1 1 1 2)		Final (1)		Final Original	
		52 V		102	
5		56 V V		104 105 106	
		57 ; , , , , , , , , , , , , , , , , , ,		107 108 109	
10 11		61	-	11b	
12 -		63 64		112 113 114	
(15) (6)		65 66 67		115 117	
(9)		68 69 70		118 119 120	
		7 72 7B		12 3 12 2 12 3	
(5)		74 75		124	
26 . 27		76 77 78 79 79 79		128 128 ÷	
29 30 31		80 81		129 -	
32		62 63 84		132 \(\) 133 \(\) 134 \(\)	
33 34 35 36		8 5		135 ² 136 ² 137 ²	
37 38 39 V V		86 89 90		138 수	
41 / /		90 91 92		140	
43 🗸 🗸		9h 92 93 94 95		143 144 145	
46 VV 47 V V		95		146	
48 / / / 49 / / 50 / /		98 99 100		148 149 150	

If more than 150 claims or 10 actions staple additional sheet here

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